

### REPORT OF RECEIPTS AND EXPENDITURES

OF A POLITICAL COMMITTEE State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

### IS THIS AN AMENDMENT? Ves ☐ No

(CFA-4) **Summary Sheet** 

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

COMMITTEE INFORMATION			
Full Name of Committee (as on Statement of Organization)  Check if this is a new relation.	name		A STATE OF THE STA
Carter for Council			
2. Acronym or Abbreviated Name (if any)	3. Committee	Telephone Number	
, , , , , , , , , , , , , , , , , , , ,	( )		
Mailing Address (address where all campaign finance correspondence is received)      Cl     13312 Sedgwick Lane	heck if this is a	new address	
5, City, State, ZIP Code	6. Party Affilia	ation (if applicable)	
Carmel, IN 46074	Republica		
CANDIDATE INFORMATION (For Candidate's C	committees O	nly)	
7. Full Name of Candidate (Include any nickname)	8. Party Affilia	ation or If Independent	Candidate
Carter for Council	Republica	n	
9. Office Sought (Include district number, if any. Not required for exploratory committee.)	10. County of	Residence	
City Council At-Large	Hamilton		
TYPE OF REPORT		CONVENTION	CANDIDATES ONLY
11. Check one:		Check one:	
Pre-Primary Pre-Election Annual Nomination Other		D Pre-Conver	
Final/Disbands Committee (lines 18, 19, and 20 must be '0') Utgoing Treasurer (within 10 days amend Statement of	f Organization)	Post-Conve	ention
12. Reporting Period:		COLUMN A	COLUMNB
From: 1/1/08 Through: 12/31/08		This Period	Year to Date
13. Cash on hand and investments at the beginning of this reporting period.	NAME OF THE PARTY	4,227.63	
14. Cash on hand and investments January 1, ситтепт year.			4,227.63
CONTRIBUTIONS AND RECEIPTS			
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)			
15a. Itemized (use Schedule A)			
15b. Unitemized		9.89	9.89
	OTAL	9.89	9.89
	TOTAL	4,237.52	4,237.52
EXPENDITURES			
(Note: These amounts include in-kind expenditures and loan repayments.)			
17a. Itemized (use Schedule B) (Public Question: use Schedule C)			
17b. Unitemized			0.00
	TOTAL	0.00	0.00
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)	TOTAL	4,237.52	4,237.52
19. Debts OWED BY the committee (use Schedule D)	12	.316.02	
20. Debts OWED TO the committee (use Schedule E)			
TIFICATION		FOI	R OFFICE USE ONLY
T OF MY KNOWLEDGE AND BELIEF IT IS T	RUE, CORRECT A	ND COMPLETE.	
_Title	Date	CONSTED OF STREET	ĬÕKOTJEMAH
Veasurer	1 41	21100 XIII	ANAT CA
	D-1-	· / ZHVU7	
	Date /	2/15	73 87 4 VM
for sale or used for any commercial purpose. person who fails to file a complete or accura	(IC 3-9-4-5) A peo	2/15 son who knowingly	11 17 172



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

# (CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be Itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

	FIL	E NUMBER	
Page _	2	of	

<u></u>				
CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEIVED
(street, number, city, state, ZIP code)	ON OTHER REGER	PERIOD	YEAR-TO-DATE	RECEIVED BY
1.	Contributions:			
	Direct			
	☐ In-Kind (describe)			
	Other Receipts:			
	Interest Loan			
	Misc. (specify)			1
Pantihuisa'a Occupation (frantical)				
Contributor's Occupation (if required)	Contributions:			
<b>4</b>	Direct			
	In-Kind (describe)			
	Other Receipts:			
	☐ Interest ☐ Loan			
	Misc. (specify)			
Contributor's Occupation (if required)				
3.	Contributions:			
	Direct			
	n-Kind (describe)			
	Other Receipts:			
	Interest Loan			,
•	Misc. (specify)			
Contibuted Convertion (fronted)				
Contributor's Occupation (if required)	Contributions:	Laborate PV		
7	Direct			
	In-Kind (describe)			
			}	
	Other Receipts:			
	Interest Loan			
	Misc. (specify)			
Contributor's Occupation (if required)				
5.	Contributions:		***************************************	
	Direct			
	In-Kind (describe)			
	Other Receipts:			
	Interest Loan			
	Misc. (specify)			
Contributor's Occupation (if required)		_	u	
	THIS PAGE OF SCHEDULE A	\$		
TOTAL OF ALL PAGES OF SCHEDULE				
(Enter total on ITE	M 15a of the Summary Sheet)	\$/		



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

# (CFA-4 SCHEDULE A-2) CONTRIBUTIONS BY CORPORATIONS

**Itemized Contributions and Other Receipts** 

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from corporations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

	FILE	ENUMBER	
	2	17)	
Page	<u>_</u>	of <i>l</i> _	

	CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS Street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
<b>1.</b>	Street, number, eng, state, En voue)	Contributions:  Direct In-Kind (describe)  Other Receipts: Interest Loan Misc. (specify)			V
2.		Contributions:  Direct In-Kind (describe)  Other Receipts: Interest Loan Misc. (specify)			
3.		Contributions:  Direct In-Kind (describe)  Other Receipts: Interest Loan Misc. (specify)			
4.		Contributions:  Direct In-Kind (describe)  Other Receipts: Interest Loan Miso. (specify)			
5.		Contributions:  Direct In-Kind (describe)  Other Receipts: Interest Loan Misc. (specify)	,		
		THIS PAGE OF SCHEDULE A	\$		
	TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITE	A ON THE LAST PAGE ONLY MINING THE LAST PAGE ONLY MINING THE SUMMARY Sheet)	\$ 4		



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

### (CFA-4 SCHEDULE A-3) CONTRIBUTIONS BY LABOR ORGANIZATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY LABOR ORGANIZATIONS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from labor organizations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be Itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER				
Page_	4	oflO		

CONTRIBUTOR'S FULL NAME AND	TYPE OF CONTRIBUTION	COLUMN A	COLUMN B	DATE RECEIVED
FULL MAILING ADDRESS (street, number, city, state, ZIP code)	OR OTHER RECEIPT	AMOUNT THIS PERIOD	CUMULATIVE YEAR-TO-DATE	RECEIVED BY
1.	Contributions:			
	Direct In-Kind (describe)			
	Other Receipts:			
	Interest Loan  Misc. (specify)		,	
				!
2.	Contributions:			
	Direct In-Kind (describe)			-
	I HPIGITA (0.030100)			
	Other Receipts:			
	Interest Loan Miso. (specify)			
3.	Contributions:			
	Direct In-Kind (describe)			
	Other Receipts:			
	☐ Interest ☐ Loan ☐ Misc. (specify)			
	[ [ [ [ [ [ [ [ [ [ [ [ [ [ [ [ [ [ [			
4.	Contributions:			
<u> </u>	Direct			
	In-Kind (describe)			
	Other Receipts:			
	☐ Interest ☐ Loan ☐ Misc. (specify)			
	in misc. (specify)			
5.	Contributions:		119	
	Direct			
	In-Kind (describe)			
	Other Receipts:	-		
	☐ Interest ☐ Loan ☐ Misc. (specify)			
	mas fobsenti	,		
SUBTOTAL	. THIS PAGE OF SCHEDULE A	\$		
TOTAL OF ALL PAGES OF SCHEDULE	A ON THE LAST PAGE ONLY	\$		
(Enter total on IT	EM 15a of the Summary Sheet)	<u> </u>		



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

# (CFA-4 SCHEDULE A-4) CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES

**Itemized Contributions and Other Receipts** 

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from political action committees OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers in and in-kind contributions regardless of amount from political action committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

	FILE	NUMB	ER	
Page _	5	_ of _	10	

	CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1.	- (street, number, erry, state, En code)	Contributions: Direct In-Kind (describe)			
		Other Receipts:  Interest Loan  Misc. (specify)			
2.		Contributions: Direct In-Kind (describe)			
		Other Receipts:  Interest Loan  Misc. (specify)			
3.		Contributions: Direct In-Kind (describe)			
		Other Receipts: Interest Loan Misc. (specify)			
4.		Contributions:  Direct In-Kind (describe)			
		Other Receipts: Interest Loan Misc. (specify)			
5.		Contributions: Direct In-Kind (describe)			
		Other Receipts:  Interest Loan  Misc. (specify)	,		
		THIS PAGE OF SCHEDULE A	\$		
	TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITE	A ON THE LAST PAGE ONLY M 15a of the Summary Sheet)	\$		



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

### (CFA-4 SCHEDULE A-5) CONTRIBUTIONS BY OTHER ORGANIZATIONS

**Itemized Contributions and Other Receipts** 

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION COMMITTEES AND INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from other entities OVER \$100 per contribution, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from candidate's, legislative caucus, and regular party committee MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER					
Page _	$\mathcal{U}$ of	10			

CONTRIBUTOR'S FULL NAME AND	TYPE OF CONTRIBUTION	COLUMN A	COLUMN B	DATE RECEIVED
FULL MAILING ADDRESS	OR OTHER RECEIPT	AMOUNT THIS	CUMULATIVE	RECEIVED BY
(street, number, city, state, ZIP code)	Onderford Const.	PERIOD	YEAR-TO-DATE	
1.	Contributions:  Direct			
	n-Kind (describe)			
			:	
	Other Receipts:			
	☐ Interest ☐ Loan			
	Misc. (specify)			
2.	Contributions:			
	Direct			
	In-Kind (describe)			
	Other Receipts:  Interest Loan			
	Misc. (specify)			
	La mod (opoday)			
	O1-1			
3.	Contributions:			
	☐ In-Kind (describe)			
	Other Receipts:			
	☐ Interest ☐ Loan			
	Misc. (specify)			
4.	Contributions:			
	Direct			
	☐ In-Kind (describe)			
				· · · · · · · · · · · · · · · · · · ·
	Other Receipts:			
	Misc. (specify)			
	Las (choons)			
<u> </u>	Cantilusiana			-
5.	Contributions:			
	In-Kind (describe)			
	Other Receipts:			
	☐ Interest ☐ Loan			
	Misc. (specify)			
		,		
SUBTOTAL	THIS PAGE OF SCHEDULE A	\$		
TOTAL OF ALL PAGES OF SCHEDULE		(/)		
	f 15a of the Summary Sheet)	\$ \tau		
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State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14

# (CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

	FILE	NUME	BER	
Page	7	of _	10	

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	~		
	SUBTOTAL THIS PAG		\$		
TOTAL OF ALL PA	AGES OF SCHEDULE B ON TH (Enter total on ITEM 17a of	E LAST PAGE ONLY the Summary Sheet)	\$		



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

# (CFA-4 SCHEDULE C) ITEMIZED EXPENDITURES For Public Questions

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. All cumulative expenses or transfers-out, regardless of amount paid to political committees supporting or opposing a public question, MUST be itemized on this schedule.

FILE NUMBER	
0	
Page of	

				70	
	PUBLIC QUESTIO	NINFORMATION			
Enter Text of Public Question					
	,				
Type of Question: Statewide					
Position: Supported Oppo		TYPE OF EXPENDITURE	COLUMN A	COLUMN B	2475.05
RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION	and PURPOSE (be specific)	AMOUNT THIS PERIOD	CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
Code		☐ Direct ☐ In-Kind ☐ Payment of Debt			
		Returned Contribution			
		Other			
		Purpose:			
		Direct In-Kind			
Code		Payment of Debt			
		Returned Contribution	' '		
		Other Purpose:			
- Address - Addr	, the same of the				
Code		Direct In-Kind			
		Payment of Debt Returned Contribution			
		Other			
		Purpose:			
Code	and the second of the second o	☐ Direct ☐ In-Kind			
		Payment of Debt Returned Contribution			
		Other			
		Purpose:			
		☐ Direct ☐ In-Kind			
Code		Payment of Debt			
		Returned Contribution Other			
		Purpose:			
		☐ Direct ☐ In-Kind			
Code		Payment of Debt			
		Returned Contribution			
		OtherPurpose:			
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		GE OF SCHEDULE C	\$		
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State Form 4606 (R9 / 11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

# (CFA-4 SCHEDULE D) Debts Owed by This Committee

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Page	<u>l.</u>	of	 

"ISTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this sedule, see instructions on the reverse side. List all debts and loans, regardless of the amount, OWED BY the ammittee during the reporting period. Include all amounts owed for or to lending institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

·					
CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS (street, number, city, state, ZIP code)	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (if any) (street, number, city, state, ZiP code)	AMOUNT  NATURE OF DEBT	DATE DEBT CUMULATIVE INCURRED PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD	
Ronald Carter		111.751	62802		
1311 Ridg Rd. Ournel IN 46033		41.01	10/20/02	41.01	
LENDERS OCCUPATION		Wan		<u> </u>	
Royald Carter 1311 Riog Rd.		13.63	7/30/02	54.04	
CAYNO, 1N 40033		lvan		OFW	
Ronald arter 1311 Ridge Rd.		100,00			
Carnel, IN 40033	•	luan	32103	15464	
RONALD Carter 1311 Rioge Rd.		77.97			
Carmel, 1 No 033		lvan	3/22/03	123261	
Bound Carter	,	_			
1311 Ridge Rd.		1350,58	3/24/03	1583.19	
Carmel, 14 40033		loan			
Konald Carter 1311 Ridge Rd.		118.72	2177102	1701.91	
Carmel IN 40033		Wan	3 27 03	1 10(. ()	
Ronald Carter		569.64			
1311 Ridge Rd.		1	4/6/03	2271.55	
SUB TOTAL THIS PAGE OF SCHEDULE D					
			D ON THE LAST PAGE ONLY	1271.55 s	



State Form 4608 (R8 / 8-97) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1997

# (CFA-4 SCHEDULE D) Debts Owed by This Committee

	FILE	NUMBE	R	
<u> </u>				:
Page	7_	of	2	

In TRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount, OWED BY the committee during the reporting period. Include all amounts owed for or to lending institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS (street, number, city, state, ZIP code)	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	AMOUNT NATURE OF DEBT	DATE DEBT INCURRED	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
HONOLO CAPTER 1311 RICK Rd- Carnel, 11,0033		191.81 Loan	4/11/03		2463.36
Ronald Carter 1311 Ridge Rd. Carnel, My		24.23 Wan	4/13/03		2487.59
LENDERS OCCUPATION: LIOUSS  LENDERS OCCUPATION:	,	3337.90 Lan	3/10/95		5825.49
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LENDERS OCCUPATION:					
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LENDERS OCCUPATION:					
LENL3 OCCUPATION:		SUB TOTAL	THIS PAGE OF	SCHEDULE D	3553.94

TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY

(Enter total on ITEM 19 of the Summary Sheet)

State Form 4606 (R9 / 11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

# (CFA-4 SCHEDULE D) Debts Owed by This Committee

	FIL	E NUMB	ER		
		•			
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Page	<u> </u>	of	(		:

LUCTIONS: Please type or print legibly IN BLACK INIX all information on this form. For assistance in completing this
corrected see instructions on the mucros side. List all debts and loans, repartiess of the amount, OWED BY the
committee during the reporting period. Include all amounts owed for or to lending institutions, individuals,
credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the
name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes
loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

			i	CUMULATIVE	OUTSTANDING
CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	AMOUNT  NATURE OF DEBT	DATE DEBT INCURRED	PAID YEAR-TO-DATE	BALANCE THIS PERIOD
(street, number, city, state, ZIP code)					
Ronald Corter 1311 Ridge Rd. Councel, IN 40032		39 <u>8</u> 5,33	مرامدانیا		9810.82
Council, 1N 40032		loan	4/28/03	•	; }
LENDERS OCCUPATION		,			
Ronald Carter		43.92			,
		1	6303		9854.75
LEHOEPS OCCUPATION:		lian			
Ronald Carter		300.87			
		300.01	5603		10,161.61
ENDERS OCCUPATION:	i.	Wan			<u> </u>
Ronald Carter					
19.		38. B	4303		10,200.30
		Wan	1,100	•	10,00
ENDERS OCCUPATION		acci,			
Royald Carter		47.32			2 12 (6)
		1.20	5303		10.247.69
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TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY (Enter total on ITEM 19 of the Summary Sheet)					



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

## (CFA-4 SCHEDULE D) DEBTS OWED BY THIS COMMITTE

(Enter total on ITEM 19 of the Summary Sheet)

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount. OWED BY the committee during the reporting period. Include all amounts owed for or to lend institutions; individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

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Page	of

CREDITOR'S OR LENDER'S NAME  8. MAILING ADDRESS	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (if any) (streef, number, city, state, ZIP code)	AMOUNT NATURE OF DEBT	DATE DEBT INCURRED	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDIN BALANCETH PERIOD
Ronald Carter 12715 Stanwich Curmel IN 46033	my Campaign Stave PO BOX 594 Jeffersonville, IN 47	1,749,34 131 LOAN	3/1/07		11996.94
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LEFIDER'S OCCUPATION.					
LENDER'S OCCUPATION.					
LEIDER'S OCCUPATION					
LENDER'S OCCUPATION:		SIBIOTA	AI THIS PAGE (	F SCHEDULE D	1749.34
1	TOTAL OF AL	L PAGES OF SCHEDU			[[14,15]



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

# (CFA-4 SCHEDULE D) DEBTS OWED BY THIS COMMITTEE

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount. OWED BY the committee during the reporting period. Include all amounts owed for or to lend institutions, individuals, credit purchases, committee credit d accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A .der's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

FILE NUMBER				
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CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS (street, number, city, state, ZIP code)	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	AMOUNT	DATE DEBT INCURRED	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
Ronald Carter 12715 Stanwich Carnel, 1216033	OSP Printing 102 W. Carnel D Carnel, M 40032	1.\$286.20 Wan	42707		12, <b>2</b> 83.14
Ronald Carter 12715 Stanwich Carmel, 1N 44033	le Peep Carmel, M	32.86 Wan	4/20/07		12,314.02
DER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:		SUBTOTA	AL THIS PAGE (	OF SCHEDULE D	319.06

TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY
(Enter total on ITEM 19 of the Summary Sheet)

12,316.02



# (CFA-4 SCHEDULE E) DEBTS OWED TO THIS COMMITTEE

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount, OWED TO the committee during the reporting period. Include all amounts the committee has loaned to others.

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BORROWER'S NAME	CO-SIGNER'S NAME & MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	ORIGINAL AMOUNT	DATE DEBT INCURRED	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
& MAILING ADDRESS (street, number, city, state, ZIP code)		NATURE OF DEBT			
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			water c		
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SUBTOTAL THIS PAGE OF SCHEDULE E				\$	
TOTAL OF ALL PAGES OF SCHEDULE E ON THE LAST PAGE ONLY (Enter total on ITEM 20 of the Summary Sheet)				<b>\$</b>	